

PRE-APPLICATION
YEAR 2005
COMMUNITY DEVELOPMENT BLOCK GRANT (CDBG) PROGRAM
EMERGENCY SHELTER GRANT (ESG) PROGRAM
Re-CAPTURED URBAN DEVELOPMENT ACTION GRANT (R-UDAG)

Please check which program you are applying for:

☐ CDBG

☐ ESG

☐ R-UDAG

Please check type of project:

☐ Services

☐ Construction

☐ Other (specify) _____

Applicant Information

Agency:		
Contact Person Name/Title:		
Address:		
Phone #:	Fax #:	E-mail Address:
Please indicate if you currently have your 501(c)(3) non-profit status: <input type="checkbox"/> Yes <input type="checkbox"/> No		
Please indicate if you are registered with the Secretary of State and licensed as required to do business in the State of Georgia: <input type="checkbox"/> Yes <input type="checkbox"/> No		

Project Information

Amount Requested:	Agency Funds or Other Funds to be contributed to project:	Total Project Cost:
\$	\$	\$
Project Description – Include a brief description of the proposed activity.		
How did you determine there was a need for this project?		
Project Beneficiaries: Number of individuals currently served: _____ Proposed number to be served: _____ How many low- to moderate-income individuals? _____		
Signature & Title of Person Authorized to Sign on behalf of agency:		

Deadline: March 26, 2004 by 5:00 p.m.



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